

STATE OF WISCONSIN Division of Hearings and Appeals

In the Matter of

DECISION

MOP/170345

PRELIMINARY RECITALS

Pursuant to a petition filed November 23, 2015, under Wis. Stat., §49.45(5), to review a decision by the Rock County Dept. of Social Services to recover Medical Assistance (MA), a hearing was held on January 13, 2016, by telephone. A hearing set for December 16, 2015 was rescheduled at the petitioner's request.

The issue for determination is whether an MA overpayment resulted from petitioner's failure to report increased income.

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services 1 West Wilson Street, Room 651 Madison, Wisconsin 53703

By:

Rock County Dept. of Social Services P.O. Box 1649 Janesville, WI 53546

ADMINISTRATIVE LAW JUDGE:

Brian C. Schneider Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner (CARES #) is a resident of Rock County.
- 2. Petitioner received BadgerCare Plus (BC+) MA in 2013 and 2014. By a notice dated October 13, 2015, the county informed petitioner that he was overpaid \$5,301.72 from August 1, 2013 through February 28, 2014, because he failed to report increased income, claim no.

3. Prior to the hearing the overpayment specialist discovered that the original error was made by the county worker in budgeting petitioner's reported income. Therefore at least the initial part of the claim was due to agency error. In addition the later months also might be due to agency error because petitioner provided paystubs in late 2013.

DISCUSSION

MA overpayment recovery is authorized by Wis. Stat., §49.497(1):

- (a) The department may recover any payment made incorrectly for benefits provided under this subchapter or s. 49.665 if the incorrect payment results from any of the following:
- 1. A misstatement or omission of fact by a person supplying information in an application for benefits under this subchapter or s. 49.665.
- 2. The failure of a Medical Assistance or Badger Care recipient or any other person responsible for giving information on the recipient's behalf to report the receipt of income or assets in an amount that would have affected the recipient's eligibility for benefits.
- 3. The failure of a Medical Assistance or Badger Care recipient or any other person responsible for giving information on the recipient's behalf to report any change in the recipient's financial or nonfinancial situation or eligibility characteristics that would have affected the recipient's eligibility for benefits or the recipient's cost-sharing requirements.

See also the department's <u>BC+ Handbook</u>, Appendix 28.2. The overpayment must be caused by the client's error. Overpayments caused by agency error are not recoverable.

The <u>Handbook</u>, App. 28.4.2 provides that if an overpayment is caused by a failure to report increased income, and the household would have remained eligible for BC+ but with increased premiums, the overpayment is the difference between the premiums originally paid and the correct premiums based on the actual income. In this case no premiums were paid originally, so the overpayment is the full amount of the premiums that should have been paid.

In this case the county originally determined that petitioner was overpaid because he failed to report higher income. It was determined later that he reported his income accurately but the worker erred in budgeting it. Petitioner also supplied pay stubs at a review in November, 2013 and the budgeted amount was changed, so it is possible that the overpayment amount in later months was calculated incorrectly.

I will remand the case to the county to re-determine the overpayment, if any. After petitioner is notified about the result of the redetermination, he can file a new appeal if he disagrees with the result.

CONCLUSIONS OF LAW

The initial overpayment claim was due to agency error and thus petitioner's liability for any overpayment must be re-determined.

THEREFORE, it is

ORDERED

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision.** Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison, Wisconsin, this 14th day of January, 2016

\sBrian C. Schneider Administrative Law Judge Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on January 14, 2016.

Rock County Department of Social Services
Public Assistance Collection Unit
Division of Health Care Access and Accountability